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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/715,804
	Filing Date	11/18/2003
	First Named Inventor	Margaret L. Goodwin
	Group Art Unit	2124
	Examiner Name	JOHN Q CHAVIS
Total Number of Pages in This Submission	Attorney Docket Number	MS1-1791US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) ( <i>please identify below</i> ): - Cited References (2) - PTO Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	John E. Whitaker/Reg. No. 42222
Signature	
Date	2/18/05

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Pam M. Prellwitz
Signature	
Date	2/22/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Ifw

PATENT  
Docket No.: MS1-1791US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Inventorship	: Goodwin et al.	)	Examiner:
Applicant	: Microsoft Corporation	)	<b>John Q. Chavis</b>
Serial No.	: 10/715,804	)	Art Unit:
Filed	: November 18, 2003	)	<b>2124</b>
Confirm. No.	: 5203	)	

**INFORMATION DISCLOSURE STATEMENT ("IDS")**

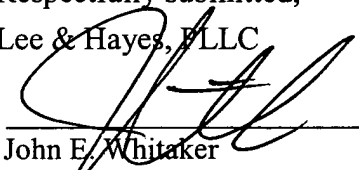
Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Applicant respectfully requests consideration of the information identified on the attached forms PTO/SB/08A and PTO/SB/08B in compliance with 37 C.F.R. §§ 1.56, 1.97 and 1.98. Since it is believed this IDS is being filed before the mailing of a first Office action on the merits, no fees are required. If any fees are required in connection with this IDS, however, the Commissioner is hereby authorized to charge the required fees, or credit any overpayments, to Deposit Account No. 12-0769.

Respectfully submitted,  
Lee & Hayes, PLLC

Date: 2/18/05

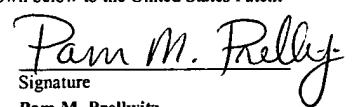
By   
John E. Whitaker  
Registration No. 42,222  
Direct Phone No. (206) 315-4001

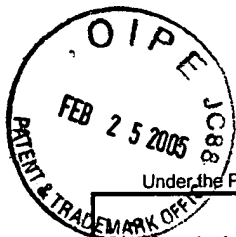
**CERTIFICATE OF MAILING OR TRANSMISSION**  
(Under 37 CFR § 1.8(a))

I hereby certify that this correspondence is being:

deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; or

transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703)

Date 2/22/05 Signature   
Date Printed Name  
**Pam M. Prellwitz**



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<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>			<b>Complete if Known</b>		
			Application Number	10/715,804	
Substitute for form 1449A/PTO			Filing Date	11/18/2003	
			First Named Inventor	Margaret L. Goodwin	
			Art Unit	2124	
			Examiner Name	John Q. Chavis	
Sheet	1	of	2	Attorney Docket Number	MS1-1791US

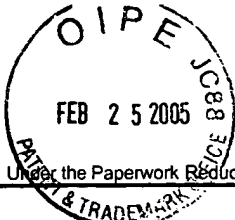
U.S. PATENT DOCUMENTS						
Examiner Initials <sup>6</sup>	Cite No. <sup>1</sup>	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)				
		US- 20040172443	A1	09-02-2004	Alcazar et al.	
		us- 20040172635	A1	09-02-2004	Watt et al.	
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FOREIGN PATENT DOCUMENTS							
Examiner Initials <sup>6</sup>	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)					

Examiner Signature	Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE          STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>			<b>Complete if Known</b>		
			Application Number	10/715,804	
			Filing Date	11/18/2003	
			First Named Inventor	Margaret L. Goodwin	
			Group Art Unit	2124	
			Examiner Name	John Q. Chavis	
Sheet	2	of	2	Attorney Docket Number	MS1-1791US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		(Unpublished) U.S. Application No. 10/974,422 (Attorney Docket No. 304707.01), filed on October 26, 2004 by Anderson et al., entitled "Hosting Environment Abstraction Model for Content," which is a Parent of U.S. Application No. 11/031,548 (Attorney Docket No. 304707.02)	
		(Unpublished) U.S. Application No. 11/031,548 (Attorney Docket No. 304707.02), filed on January 7, 2005 by Anderson et al., entitled "Object Models Enabling Hosting Content In A Plurality Of Environments," which is a Continuation of U.S. Application No. 10/974,422 (Attorney Docket No. 304707.01)	

Examiner Signature	Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.  
<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.  
 This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 120 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing the this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/715,804
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 0.00		Filing Date	11/18/2003
		First Named Inventor	Margaret L. Goodwin
		Examiner Name	JOHN Q. CHAVIS
		Art Unit	2124
		Attorney Docket No.	MS1 - 1791US

**METHOD OF PAYMENT (check all that apply)**

Check  
  Credit Card  
  Money Order  
  None  
  Other (please identify): \_\_\_\_\_

Deposit Account  
 Deposit Account Number: 12-0769  
 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  
  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  
  Credit any overpayments

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**    **Multiple Dependent Claims**  
 \_\_\_\_\_ - 20 or HP = \_\_\_\_\_ x 50 = \_\_\_\_\_    **Fee (\$)**    **Fee Paid (\$)**  
 HP = highest number of total claims paid for, if greater than 20

**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**  
 \_\_\_\_\_ - 3 or HP = \_\_\_\_\_ x 200 = \_\_\_\_\_  
 HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	_____ (round up to a whole number)	x _____ = _____	_____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

<b>SUBMITTED BY</b>		
Signature	Registration No. 42222	Telephone (206) 315-4001
Name (Print/Type) John E. Whitaker	(Attorney/Agent)	Date 2/18/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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